AMENDMENTS

IN THE CLAIMS

1 - 57. (Canceled)

58. (Previously Presented) The method of claim 72, wherein the aerosol particle size is adjusted such that the aerodynamic diameter of the aerosol particles is in a range of from 1-3 μm and alveoli of the patient's respiratory tract are targeted.

59. (Previously Presented) The method of claim 72, wherein the aerosol particle size is adjusted such that the aerodynamic diameter of the aerosol particles is in a range of from 4-6 μm and central airways of the patient's respiratory tract are targeted.

60. (Previously Presented) The method of claim 72, wherein the aerosol particle size is adjusted such that the aerodynamic diameter of the aerosol particles is in a range of from 7-10 μm and upper airways of the patient's respiratory tract are targeted.

61. - 69 (Canceled)

70. (Previously Presented) The method of claim 72, further comprising:

adjusting the patient's inspiratory flow rate inside a range of about 0.10 to about 4.0 liters/second.

71. (Previously Presented) The method of claim 70, wherein the flow rate is adjusted inside a range of about 0.2 to about 3.0 liters per second.

72. (Currently Amended) A method of targeting an area of a patient's respiratory tract, comprising:

aerosolizing a formulation to create aerosol particles comprised of polynucleotides and a polynucleotide condensing agent complexed with negatively charged phospholipids <u>comprising cholesteryl glutarate,</u> wherein the condensing agent is protamine sulfate which condenses the polynucleotides to a size in a range of from about 20 to about 50 nanometers;

adjusting an aerodynamic diameter of the aerosolized particles based on a targeted area of a patient's respiratory tract; ~~and~~

inhaling a volume of aerosol particles of the formulation and aerosol-free air; and

controlling ~~a~~ the patient's inhaled volume of aerosolized formulation and aerosol-free air.

73. (Canceled)